2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005169

FILED Mar 16, 2009 Secretary of State

Entity Name: A NEW GENERATION OF HERNANDO, INC.

Current Principal Place of Business: New Principal Place of Business: 134 E FT DADE AVE BROOKSVILLE, FL 34601 **Current Mailing Address: New Mailing Address:** P O BOX 1935 BROOKSVILLE, FL 34605 FEI Number: 59-3596705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOODRUFF, SHAWN 4195 NEFF LAKE RD BROOKSVILLE, FL 34601 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BROWN, CARL REV RESSEL, CYNTHIA Name: Name: 29249 WILPAYNE ROAD Address: 1117 CINDY DRIVE Address: City-St-Zip: BROOKSVILLE, FL 34922 City-St-Zip: BROOKSVILLE, FL 34601 Title: SD () Delete Title: SD (X) Change () Addition RESSEL, CYNTHIA Name: BENFIELD, RUTH Name: Address: 11117 CINDY DRIVE Address: 22944 JACOBSON RD. City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: BROOKSVILLE, FL 34601 Title: () Delete Title: (X) Change () Addition VARVEL, HAROLD CALLAGHAN, KEVIN Name: Name: 25086 ANGEL STREET Address: 140 LAKE AVE Address: City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: BROOKSVILLE, FL 34601 () Delete () Change () Addition Title: TD Title: WOODRUFF, SHAWN Name: Name: 4195 NEFF LAKE RD Address: Address: City-St-Zip: BROOKSVILLE, FL 34601 City-St-Zip: Title: () Delete Title: () Change (X) Addition RENFROE, RICHARD Name: Name: 24207 WESTMINISTER CT. Address: Address: City-St-Zip: City-St-Zip: BROOKSVILLE, FL 34601 Title: () Delete Title: () Change (X) Addition KESSEL. ERIC Name: Name: 408 LAW ST. Address: Address: BROOKSVILLE, FL 34601 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHAWN WOODRUFF TD 03/16/2009